09/274580

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | T.D | | 8/20/99 |
| O.I.P.E. CLASSIFIER | M+W | 59 | 8-24-99 |
| FORMALITY REVIEW | | 71090 | 8/30/99 |

## INDEX OF CLAIMS

| | | | |
|---|---|---|---|
| ✔ ........................... Rejected | | N ........................... Non-elected |
| = ........................... Allowed | | I ........................... Interference |
| — (Through numeral)... Canceled | | A ........................... Appeal |
| ÷ ........................... Restricted | | O ........................... Objected |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)